



## Work Order (Bid Form)

### WORK ORDER INFORMATION

Work Order Name: \_\_\_\_\_

Work Order Type: Weatherization

Audit Name: MADISON

### CLIENT INFORMATION

Client Name: \_\_\_\_\_

Address: \_\_\_\_\_

Client ID: \_\_\_\_\_

Alt. Client ID: 16016SW-0678

### AGENCY INFORMATION

Agency: SWHRA

Agency Phone: (731) 989-5111

Address: 1574 White AVE  
Henderson, TN

Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Agency Contact: STANFILL, BUTCH

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Company Name & License Number: \_\_\_\_\_

Contractor's Signature: \_\_\_\_\_

### COMMENT

All work performed and material must meet all requirements as stated in the Southeast Weatherization Field Guide. It is the contractor's responsibility to pull all necessary permits required for the town or county where the work is being performed. No change order work shall be done until the change order has been approved and signed. If heater is required no air sealing should be done before heater is installed.

731-660-5538

Client Name:

Client ID:

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## Measures

Measure 1 Seal Ducts		Components						Inspected	
Comment		Estimated				Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Construction Materials/Hardware	Mastic duct boots.Check connection in master bath presure pan reading was high on that register.	Each	1					
2	Labor	Labor	Hour						
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

Measure 2 Infiltration Redctn			Components						Inspected
Comment									<input type="checkbox"/>
			Estimated				Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Construction Materials/Hardware	Master bath seal pipes under sink, Bath1 seal closet ceiling and wall. Hall closet seal wall over door and corners, bed room 1 seal closet jam inside.	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Construction Materials/Hardware	Bed room 2 seal closet light , Kitchen seal pipes under sink and wire to disposal. Seal dryer vent and outlet, Laundry cabinet seal inside top. Seal crown molding. Seal kitchen exhaust vent	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Labor	Labor	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
					<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
Field Notes:									

Measure 3 DWH Pipe Insulation				Components			Inspected		
Comment							<input type="checkbox"/>		
				Estimated			Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
Field Notes:									

Measure 4 Attic Ins. R-30				Components A1			Inspected		
Comment							<input type="checkbox"/>		
				Estimated			Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	Attic Insulation - Blown Cellulose - add 6 inches	SqFt	1620	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1620	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Miscellaneous Supplies	Install new pull down stairs	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	Labor	Labor	Hour		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
Field Notes:									

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Measure 5 CO Monitor is Needed				Components				Inspected	
Comment									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	CO monitor	Each	1					
2	Labor	Labor	Hour	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

Measure 6 PressureRelief Piping Needed				Components				Inspected	
Comment									
				Estimated		Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Pressure relief piping	Each	1					
2	Labor	Labor	Hour	1					
Other Detail									
Measure Sub Total:							Sub Total:		
Field Notes:									

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Measure 7 Vapor Barrier Needed (Basement/Crawlspace)		Components						Inspected	
Comment								<input type="checkbox"/>	
		Estimated				Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety Items	Basement / crawlspace vapor barrier	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Hour	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		<input type="text"/>
Field Notes:									
Work Order Grand Total:						<input type="text"/>	Grand Total:		<input type="text"/>